

**UNITED STATES PATENT & TRADEMARK OFFICE**  
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND										
1 Date of Request: <u>12/20/04</u>		2 Serial/Patent # <u>10/6069126</u>								
3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED	6 AMOUNT						
	Filing			\$						
	Amendment			\$						
<input checked="" type="checkbox"/>	Extension of Time		<u>10/5/04</u>	\$ <u>1005</u>						
	Notice of Appeal/Appeal			\$						
	Petition			\$						
	Issue			\$						
	Cert of Correction/Terminal Disc.			\$						
	Maintenance			\$						
	Assignment			\$						
	Other			\$						
		7 TOTAL AMOUNT OF REFUND		\$ <u>1005</u>						
		8 TO BE REFUNDED BY: <u>CC</u>								
10 REASON:		Treasury Check								
	Overpayment	Credit Deposit A/C #:								
	Duplicate Payment	9 <table border="1" style="display: inline-table; text-align: center; width: 150px;"><tr><td><del>5</del></td><td><del>0</del></td><td><del>2</del></td><td><del>1</del></td><td><del>3</del></td><td><del>7</del></td></tr></table>			<del>5</del>	<del>0</del>	<del>2</del>	<del>1</del>	<del>3</del>	<del>7</del>
<del>5</del>	<del>0</del>	<del>2</del>	<del>1</del>	<del>3</del>	<del>7</del>					
<input checked="" type="checkbox"/>	No Fee Due (Explanation): <u>Extension filed after extendable period.</u>									
11 REFUND REQUESTED BY:										
TYPED/PRINTED NAME: <u>Sherry D. Brinkley</u>		TITLE: <u>Petition Examiner</u>								
SIGNATURE: <u>Sherry D. Brinkley</u>		PHONE: <u>23204</u>								
OFFICE: <u>Petitions</u>										
***** THIS SPACE RESERVED FOR FINANCE USE ONLY: *****										
APPROVED: <u>Alana Kelle</u>		DATE: <u>12/21/04</u>								

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to: